

04FICAN186

# NEVADA FINANCIAL DISCLOSURE STATEMENT

(Attach additional sheets if necessary.)

**FILE**  
MAY 24 2004  
*mdh*  
DEAN HELLER  
SECRETARY OF STATE

NAME Joseph Michael McFFO  
MAILING ADDRESS P.O. Box 535  
CITY, STATE, ZIP Proche NV. 89043  
TELEPHONE 775-962-5129

LENGTH OF RESIDENCE IN NEVADA 33 years  
LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE 6 years  
NRS 281.571(1)(a)

List all public offices for which this financial disclosure statement is required [NRS 281.571, Subsection 1(g)]:

Public Office	ANNUAL all elected and appointed public officers (no later than Jan. 15 each year) NRS 281.559(1)(b) 281.561(1)(b)	CANDIDATE (no later than the 10 <sup>th</sup> day after the last day to qualify as a candidate) NRS 281.561(1)(a)	APPOINTMENT to fill unexpired term of an elected or appointed public officer (within 30 days) NRS 281.559(1)(a)
<u>L.C. Power Dist.</u>	\$ <u>                    </u>	<input type="checkbox"/>	<input type="checkbox"/>
<u>                                    </u>	\$ <u>                    </u>	<input type="checkbox"/>	<input type="checkbox"/>
<u>                                    </u>	\$ <u>                    </u>	<input type="checkbox"/>	<input type="checkbox"/>

List all general sources of income for you and members of your household over 18 years of age [NRS 281.571, Subsection 1(b)]:

	Self	Household Member
<u>Retired So. Security OF 1248. per Month</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<u>Operating Eng. 501 Per - 1318 Per Month</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<u>Own J.S. Sporting &amp; Crop In lost \$6000. last year</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<u>                                    </u>	<input type="checkbox"/>	<input type="checkbox"/>
<u>                                    </u>	<input type="checkbox"/>	<input type="checkbox"/>

List each creditor to whom you or a member of your household owes \$5,000 or more [except (1) debt secured by mortgage or deed of trust on real property which is not required to be listed below, and (2) debt for which a security interest in a motor vehicle for personal use was retained by seller] [NRS 281.571, Subsection 1(d)]:

	Self	Household Member
<u>                                    </u>	<input type="checkbox"/>	<input type="checkbox"/>
<u>                                    </u>	<input type="checkbox"/>	<input type="checkbox"/>
<u>                                    </u>	<input type="checkbox"/>	<input type="checkbox"/>
<u>                                    </u>	<input type="checkbox"/>	<input type="checkbox"/>
<u>                                    </u>	<input type="checkbox"/>	<input type="checkbox"/>

List each business entity (i.e., organization or enterprise operated for economic gain, including a proprietorship, partnership, firm, business, trust joint venture, syndicate, corporation or association) with which you or a member of your household is involved as a trustee, beneficiary of a trust, director, officer, owner in whole or in part, limited or general partner, or holder of a class of stock or security representing 1% or more of the total outstanding stock or securities issued by the business entity [NRS 281.571, Subsection 1(f)]:

	Self	Household Member
<u>L.D. SPORTING CRAFT, INC</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<u> </u>	<input type="checkbox"/>	<input type="checkbox"/>
<u> </u>	<input type="checkbox"/>	<input type="checkbox"/>
<u> </u>	<input type="checkbox"/>	<input type="checkbox"/>
<u> </u>	<input type="checkbox"/>	<input type="checkbox"/>

List specific location and particular use of all real estate (other than personal residence): (1) in which you or a member of your household has a legal or beneficial interest; (2) the fair market value of which is \$2,500 or more; and (3) located in this state or an adjacent state [NRS 281.571, Subsection 1(c)]:

Specific Location	Particular Use
<u>100 MAIN ST. RENO NV. 89043</u>	<u>RETAIL SALES</u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>

List the identity of donor and value of each gift received in excess of an aggregate value of \$200 from a donor during the preceding taxable year [except (1) a gift received from a person who is related to you within the third degree of consanguinity or affinity; and (2) ceremonial gifts received for a birthday, wedding, anniversary, holiday or other ceremonial occasion if the donor does not have a substantial interest in your legislative, administrative, or political action] [NRS 281.571, Subsection 1(e)]:

Donor	Value of Gift
<u> </u>	<u>\$</u>
<u> </u>	<u>\$</u>
<u> </u>	<u>\$</u>
<u> </u>	<u>\$</u>
<u> </u>	<u>\$</u>

THE INFORMATION I HAVE PROVIDED HEREIN IS ACCURATE AND COMPLETE.

Date: 5-7-04

Signature

